

MECHANICAL PERMIT APPLICATION

City of Aransas Pass P.O. Box 2000 Aransas Pass TX 78335 361-758-5415

Job

Address

Owner's Name	Address	City, Zip	Phone
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License Holder & License #	Address	City, Zip	Phone
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Engineer's Name	Address	City, Zip	Phone
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Describe Work to be Done

Value of Work: \$_____

This permit becomes null and void if construction work authorized is not commenced within 6 months or if the work is suspended or abandoned for a period of 6 months at any time after work is commenced.

I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

Permit Fees shall be as follows:

For issuing each permit.....\$25.00

Plus \$10.00 per \$1,000.00 of valuation.

Valuation (_____) x \$10 =.....\$_____
per \$1,000

or

New Construction - Permit Fee + (\$0.05 x Total Gross Square Footage)

TOTAL PERMIT FEE.....\$_____

Signature of Contractor or Authorized Agent

Date